WAIVER OF SERVICE OF SUMMONS

TO: United States Marshal's Service

I acknowledge receipt of your request that I waive service of a summons in the action of Harris vs. Domestic Relations Sec. which is case number 04-369 in the United States District Court for the Western District of Pennsylvania. I have also received a copy of the complaint in the action, two copies of this instrument, and a means by which I can return the signed waiver to you without cost to me.

I agree to save the cost of service of a summons and an additional copy of the complaint in this lawsuit by not requiring that I (or the entity on whose behalf I am acting) be served with judicial process in the manner provided by Rule 4.

I (or the entity on whose behalf I am acting) will retain all defenses or objections to the lawsuit or to the jurisdiction or venue of the court except for objections based on a defect in the summons or in the service of the summons.

I understand that a judgment may be entered against me (or the party on whose behalf I am acting) if an answer or motion under Rule 12 is not served upon you within 60 days after May 25, 2005 (date,,request was sent), or within 90 days after that date if the request was sent outside the United States.

SIGNATURE

Printed/typed name: A. Taylor Williams, Esquire

Title if any: Legal Counsel to the Court Administrator of PA

Counsel For: the Honorable Stephanie A. Domitrovich

cc: Corey L. Harris P.O. Box 3618 Erie, PA 16508 Case 1:04-cv-00369-SJM-SPB U.S. Department of Justice

United States Marshals Service

See Instructions for "Service of Process by the U.S. Marshal" on the reverse of this form.

PLAINTIFF								
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ADDRESS (Street or RFD	, Apartment	No., City, Stat	te and ZIP Code)				· .
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SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW:						Number of process to be		
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1618 Ash St				E.C.P.)	,	r of parties to be in this case		
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LEGIE, PA 16503					1	Check for service on U.S.A.		
SPECIAL INSTRUCTIONS OR C Telephone Numbers, and Estimates	THER INFOR	MATION TI	HAT WILL AS rice):	SIST IN EXPEDITIN	G SERVICE	E (Include Business and a	Alternate A	ddresses, All
								
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Signature of Attorney or other Originator requesting service on behalf of:						HONE NUMBER	DATE	
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